
PROGRAMS THAT WORK

PUBLIC AND PRIVATE PROGRAMS BENEFITING
BLIND AND VISUALLY IMPAIRED PEOPLE

PREPARED BY

ORGANIZATIONS OF AND FOR THE BLIND
1986



**MFG. BY YORK COUNTY BLIND CENTER
YORK, PA.**

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P R O G R A M S T H A T W O R K

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NOVEMBER 1985

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INTRODUCTION

Purpose

This handbook was written for several reasons: First, it is designed to inform Members of Congress, their staffs, Executive Branch officials, and other policymakers of the size, scope, and nature of the many federal and private programs and policies affecting the blind and visually impaired population. Second, it illustrates the extent to which such programs and policies aid this population in achieving self-support, maximum independence, and self-reliance. Third, it demonstrates that the effects of budget reductions and the consequent diminution of programs and services are comprehensive and cumulative and will result in lost independence and reduced opportunities for blind people in America. This eventuality would be costly in human terms, resulting in increased economic burdens on our society.

During the past 45 years, a considerable body of federal legislation has been enacted in the human services area. The programs established by congressional action range from income maintenance for individuals, administered directly by the federal government, to federal financial grants to state and local governments for a variety of purposes such as health care, treatment for handicapped children, education, employment and training services, and vocational rehabilitation of the disabled.

Some programs are designed for the special needs of target groups relatively small in number; others cover large segments of the population. Some impose specific federal requirements

on grantees; others provide broad program authority to states and localities, with minimum federal direction. Whatever the type of federally assisted program, it is clear that a policy has evolved over the years which recognizes a federal responsibility to meet special needs of various population groups, including the blind and severely visually impaired.

The current Administration is concerned about the proliferation of federally assisted human services programs and increasing federal expenditures. In 1982 the Administration proposed to cede to the states total responsibility for a substantial number of federally assisted programs, including many of specific interest to blind and visually impaired persons. It has also sought authority from Congress to combine several programs into block grants which would give states and localities broader latitude in administering the programs and, in some cases, it has obtained, through congressional action, substantial reductions in spending for some of these programs.

The Severely Visually Impaired Population

Blindness and severe visual impairment are conditions whose handicapping effects vary with the individual, depending on such factors as the degree of remaining useful sight, the person's ability to use residual sight effectively and efficiently in the performance of various tasks, the presence of other impairments such as loss of hearing or loss of tactual sensitivity, and age. Blindness impairs a person's abilities in several important areas--e.g., access to the printed word, mobility, and performance of basic daily living skills. However, with adequate rehabilitation training, most blind people learn alternative, effective methods to compensate

for their vision loss so that blindness does not prevent them from living independent, active lives. Persons who are blind or severely visually impaired must often deal with patronizing attitudes of uninformed people who believe that blindness imposes insurmountable barriers to achievement or employment.

It is estimated that some 500,000 persons in the United States are legally blind and that 75 percent of this group has some useful residual vision. Three-fourths of the legally blind population are 45 years of age or older. An estimated 45,000 Americans become legally blind each year. The National Center for Health Statistics estimated that there are some 1.5 million non-institutionalized persons in the United States who have severe visual impairments. The definition of severe visual impairment used in this estimate is inability to read ordinary newsprint with the aid of correcting glasses.

In a 1976 survey the Bureau of the Census learned that approximately 217,000 institutionalized persons in long-term care facilities are blind or visually impaired. Most of these persons are over 65 years of age.

The leading causes of blindness in the United States--senile cataract, diabetic retinopathy, glaucoma, and macular degeneration--are conditions which principally affect people over 40. Blindness may also be caused by cardiovascular diseases such as arteriosclerosis, hypertension, and stroke, as well as other conditions which frequently accompany the aging process. In light of current scientific knowledge related to population growth, we can expect that the number of blind persons will increase.

This handbook is not intended to be an inclusive survey of all federal programs that affect blind and visually handicapped

Americans. Rather, it attempts to provide an overview of major programs, describing existing services and benefits and in some cases listing recent changes and those currently proposed by the Administration.

Committees

At the beginning of each section in the manual there appears a list (where appropriate) of the congressional committees and subcommittees which have major jurisdiction and/or appropriation authority over the program or programs discussed.

Each program discussed in the handbook is within the jurisdiction of at least two committees in the House of Representatives and two committees in the Senate. Every program comes under the jurisdiction of an authorizing committee which has responsibility for the substantive portion of legislation. All amendments to existing law and all new legislation are referred to the appropriate committees. In addition to the substantive provisions of legislation, these committees authorize the amount of money which may be spent on any program within their purview.

Authorization, however, does not always mean actual funding. The amount which is eventually funded for any program must be approved by the Senate and House Appropriations Committees. In both the Senate and the House, the Appropriations Committee is divided into many subcommittees which make recommendations on appropriations for programs within their subject area. The Appropriations Committee has the discretion to fund at any level up to the authorized amount but may not exceed the authorization level.

In addition, both the Budget and the Rules Committees frequently play important roles in the passage, amendment, or funding of the programs reviewed in this handbook.

Finally, the loose-leaf format allows outdated material to be easily replaced in the binder which has been distributed. Pages are numbered in sequence, beginning with the Introduction. The handbook is also available in cassette form.

Endorsing Organizations and Contacts

<u>Organization</u>	<u>Contact</u>	<u>Telephone</u>
Affiliated Leadership League of and for the Blind of America	John A. McCann	(202) 775-8261
Association for Education and Rehabilitation of the Blind and Visually Impaired	Kathleen Megivern	(703) 548-1884
American Council of the Blind	Oral Miller	(202) 393-3666
American Foundation for the Blind	Irvin P. Schloss	(202) 467-5996
Blinded Veterans Association	Ronald L. Miller	(202) 347-4010
General Council of Workshops for the Blind	William S. Thompson	(305) 586-5600
National Industries for the Blind	George J. Mertz	(201) 595-9200
Randolph Sheppard Vendors of America	Durward K. McDaniel	(512) 837-5977

ACCREDITATION

COMMITTEE

(Not applicable)

Program

The National Accreditation Council for Agencies Serving the Blind and Visually Handicapped (NAC) is the standard-setting and accrediting body in work for the blind. This voluntary, not-for-profit, corporation was created in 1966 by those it serves, with the assistance of the American Foundation for the Blind and the U.S. Department of Health, Education and Welfare. NAC is endorsed and sponsored by leading organizations of and for the blind in America and counts 55 sponsoring and supporting organizations in its membership. Currently 100 agencies and schools enjoy the benefits of NAC accreditation.

Existing Services to Blind and Visually Impaired People

NAC's primary goal is to ensure that all blind and visually impaired Americans receive the quality services needed to obtain an education, to secure gainful employment, and to live independently in their communities. Through its accreditation process, NAC strives to improve and strengthen the organizations which serve blind people and provides reasonable assurance that the services offered meet generally acceptable levels of competence and good practice.

The Standard-Setting Function. Standards are yardsticks for measuring an organization's performance based upon acceptable practice in the field of work for the blind. NAC's standards are reviewed and revised by members of its Commission on Standards, a diverse group of individuals representing professionals in work for the blind, blind consumers, and public sector representatives. The Commission on Standards is often guided in its work by special ad hoc advisory committees whose membership likewise mirrors NAC's constituency groups. The standards are contained in self-study guides which are used by agencies and schools to plan, evaluate, and improve service programs. Standards cover such subjects as program services, governance, fund raising, ethical practices, physical plant, and personnel matters--all of which have an important bearing upon an agency or school's ability to deliver quality service.

The Accreditation Function. After completing self-study and self-evaluation using NAC standards, an organization that meets eligibility standards may apply for NAC accreditation. A NAC on-site review team made up of consumer, professional, and public representatives makes an exhaustive examination of the organization's strengths and weaknesses. This review, conducted over a four-day period, encompasses every aspect of the applicant's management and operations.

Following the receipt of a written report from the on-site review team and an opportunity for the agency or school to respond, NAC's Commission on Accreditation makes a decision concerning the award of accredited status. The Commission may postpone

accreditation, award accreditation for a period of up to five years, or may deny the privilege of accreditation to organizations which do not meet NAC's standards.

The process does not stop here, however. Organizations must submit annual progress reports to the Commission and must undergo periodically an additional self-study and on-site review to maintain accreditation. In 1984 NAC revised and updated its complaint procedures which provide a mechanism by which alleged substantial departures from the standards can be investigated. As with all Commission decisions, due process is assured through procedures mandating reconsideration of a Commission decision if warranted.

The Importance of NAC Recognition. Organizations derive many benefits from accreditation. As a management tool, accreditation and the ongoing responsibilities of maintaining accredited status help an organization to identify weaknesses and take necessary steps toward improvement. The symbol of NAC accreditation confirms that the organization provides quality service and meets standards for sound management and ethical fund-raising practices.

Increasingly, accreditation has become a necessary form of public accountability for organizations receiving government or other public/private support from United Way, private donors, corporations, foundations, and even state governments. Several state rehabilitation agencies require agencies with which they contract for services to be accredited as a means of ensuring that public dollars will be spent wisely. Twelve state vocational

rehabilitation agencies themselves enjoy NAC accreditation. For the past 12 years, NAC has also been recognized by the U.S. Secretary of Education as the "reliable authority" concerning the quality of specialized schools for the blind and visually handicapped. This recognition is important to many state and federal agencies which make funding decisions with respect to specialized schools for the blind and visually handicapped. NAC has also recently applied to the Department of Education for recognition as an accrediting body for postsecondary, vocational, non-collegiate training programs for blind persons.

Recent Changes and Their Impact

As noted elsewhere in this handbook, the Administration wishes to reduce the federal oversight role in the provision of rehabilitation services to blind and visually impaired persons. No federally assisted programs for the blind, even those which may retain some categorical identity, are immune from the possibility of redefinition and accountability to new sets of authorities.

Thus, today accreditation takes on a new and increasingly crucial role. As states gain more latitude in service delivery and as federal oversight of administration of vocational rehabilitation programs is diminished, the existence of commonly accepted standards and accreditation will be vitally important to the maintenance of quality services. Having standards for services and an authority for the development of such standards will help ensure that, when programs are redefined by the states, services will be maintained at acceptable quality levels.

There are no pending legislative proposals involving NAC accreditation.

Allocation of public and private funds should be based on a criterion that agencies and schools serving the blind and visually impaired which receive such funds should be accredited.

As noted earlier, most of the major organizations of and for the blind in the United States have endorsed the concept of standards and accreditation. Several national organizations of and for the blind have adopted our recommendation or similar policies relative to the linkage of accreditation to the allocation of public/private funds. These organizations include the American Council of the Blind, the Affiliated Leadership League of and for the Blind of America, the Association for Education and Rehabilitation of the Blind and Visually Impaired (new name for the single organization established by consolidation of the American Association of Workers for the Blind and the Association for Education of the Visually Handicapped), the Council of Executives of American Residential Schools for the Visually Handicapped, and the American Foundation for the Blind.

CIVIL RIGHTS

COMMITTEES

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Senate and House Judiciary Committees

Program

Handicapped people historically have faced discrimination and exclusion from the mainstream of American life. Like other minority groups, they have been precluded from full participation in education and employment opportunities, services, and benefits available to other citizens. Congress took a preliminary step toward equal opportunity for the nation's disabled people when it enacted Title V of the Rehabilitation Act of 1973, as amended.

Section 501, 29 USC 791, enforced by the Equal Employment Opportunity Commission (EEOC), requires the federal government to take affirmative action to hire and promote capable handicapped people.

Section 503, 29 USC 793, requires federal contractors with contracts in excess of \$2,500 to take affirmative action to employ and advance capable handicapped workers. Section 503 is enforced by the Department of Labor, Office of Federal Contracts Compliance Programs.

Section 504, 29 USC 794 prohibits employment discrimination against qualified handicapped people in programs receiving federal financial assistance and in the federal government itself.

Handicapped people still lack federal protection from discrimination in private employment. They also lack comprehensive protection from discrimination in other areas such as housing.

Recent Changes and Their Impact

Section 501: The number of severely disabled federal employees has not risen in recent years. The EEOC has not devoted sufficient time nor staff to encouraging or monitoring compliance with Section 501. Federal agencies often fail to hire blind workers because of the requirement that reading assistance be provided.

Section 503: The promise of employment opportunities for large numbers of disabled people in private industry is unfulfilled. In a 1982 study of federal contractors covered by Section 503, the Employment Standards Administration of the U.S. Department of Labor found that 25 percent of the firms that responded reported no handicapped workers. ("A Study of Accommodations Provided to Handicapped Employers by Federal Contractors," U.S. Department of Labor, 1982.)

The Department of Labor has changed its 503 enforcement policies and often settles complaints if companies promise to improve their practices. Because handicapped employees have no "private right of action" under Section 503, it has not been as effective as originally contemplated.

Section 504: In Grove City College v. Bell, the Supreme Court limited the scope of Title IX coverage. Since the language of Title IX and Section 504 are similar, it is likely that Section 504 and other civil rights laws will be interpreted to apply only to the particular activities which benefit from federal financial assistance--not to all of the activities of an organization. A bill to restore the status quo prior to the Grove City decision, "The Civil Rights Act of 1984," passed the House by an overwhelming majority but failed in the Senate.

While most federal agencies have regulations implementing Section 504 in the programs for which they provide financial assistance, only the Department of Justice and the Federal Elections Commission have published final Section 504 regulations governing their own operations.

When first proposed, the Department of Justice regulations allowed the department to use a broad defense of "undue administrative and financial burdens" as an excuse for failure to operate programs so that disabled people could participate. The final regulations, issued in September 1984, for Department of Justice programs were improved however, and the "undue . . . burdens" defense is strictly limited. Other agencies are promulgating Section 504 regulations for the programs they conduct to ensure that handicapped people have equal opportunities to participate. Regulations, if vigorously enforced, should assure that handicapped persons are not excluded from federal programs.

The Supreme Court, in Atascadero State Hospital v. Scanlon, recently held that federal courts have no jurisdiction to entertain Section 504 claims against state governments or their subdivisions, such as state hospitals. This decision severely curtails Section 504 enforcement efforts because a large percentage of federal financial assistance goes directly to the states and their subdivisions. Legislation has been introduced which would amend the language of the Rehabilitation Act to make clear Congress's intent to subject states to the same responsibilities as all other recipients of federal financial assistance under Section 504.

FREE MATTER MAILING PRIVILEGE
FOR THE BLIND AND PHYSICALLY HANDICAPPED

COMMITTEES

Subcommittee on Postal Operations and Services, House
Committee on Post Office and Civil Service

Subcommittee on Civil Service, Post Office and General
Services, Senate Committee on Governmental Affairs

Subcommittee on Treasury-Postal Service and General
Government, House Committee on Appropriations

Subcommittee on Treasury, Postal Service, General Government,
Senate Committee on Appropriations

Program

Title 39 of the United States Code, Sections 3403-3405, establishes a program which allows for the mailing, free of charge, of certain materials "for the use of the blind or other persons who cannot use or read conventionally printed material because of a physical impairment" The origins of this program go back to 1899 when the first piece of legislation was enacted, allowing letters written in raised characters to be mailed by blind persons at third-class rate rather than first-class. Over the years, amendments were added which extended the categories of material to include braille writers and other special equipment, musical scores, recordings, etc. In addition, the law was amended to allow organizations of and for the blind, such as libraries, to use the privilege in mailing braille, large print, or recorded materials to blind persons. This important program was adopted in recognition of the fact that braille and large print and recorded material are expensive to mail at regular rates. The program is funded as part of a general subsidy to the Postal Service called the "Revenue Forgone Subsidy." This subsidy also helps to pay

various reduced mailing rates such as the third-class nonprofit bulk mailing category. Hence, the Revenue Forgone Subsidy is important to the many nonprofit organizations serving blind and visually impaired persons.

Existing Services and Benefits to Blind and Visually Impaired People

The "Free Matter for the Blind and Physically Handicapped" program has been a great benefit to many blind and handicapped persons. The National Library Service for the Blind and Physically Handicapped, a division of the Library of Congress, relies exclusively on the mail to distribute books, magazines, and other materials to its approximately 635,000 patrons. Likewise, many public and private organizations and agencies use the mail to circulate a large volume of specialized material to blind persons throughout the United States. The free matter mailing privilege is the primary mechanism for enriching the lives of blind and visually handicapped persons by providing them access to the printed word.

Recent Changes and Their Impact

While there have been no recent changes in the free matter mailing program, there have been several attempts in recent years to substantially reduce or eliminate the Revenue Forgone Postal Subsidy. The Administration's FY 1983 budget proposal recommended that the subsidy be eliminated. The subsidy was in fact reduced 50 percent in FY 1983. However, the conference report accompanying the budget resolution clearly indicated that the free matter program

should remain intact. Since 1983, the Reagan Administration has submitted a proposal to impose a \$400 million cap on the Revenue Forgone Subsidy; but this proposal has never been introduced as legislation.

The Administration's budget proposals for fiscal years 1984, 1985, and 1986 have all requested substantial reductions in the Revenue Forgone Subsidy. While the FY 1985 budget did contain specific funding levels for the free matter program, the FY 1986 proposal did not contain this provision. Rather, the Administration indicated that it would submit legislation to provide that the free matter mailing program would be funded out of general postal revenue under a cross-subsidization arrangement.

The Postal Reorganization Act of 1970 specifically provided for a subsidy for certain classes of mail having "educational, cultural, scientific, and informational value" to the recipient. Thus, Congress has assumed the responsibility for deciding which classes of mail shall be subsidized. Further, it is unfair to require an institutional cost subsidy from full-rate payers since Congress, as far back as 1899, established a national policy regarding the subsidization of the increased cost of providing specialized materials to blind and visually impaired persons via the postal system.

Since the distribution of specialized materials on a postage-paid basis would be prohibitively expensive for many blind persons and for the agencies and organizations serving them, the retention of the free matter mailing privilege is vital to the educational and cultural well-being of this population. Additionally, since the Revenue Forgone Subsidy provides for reduced-rate mailing

for nonprofit entities, curtailment or abolishment of this subsidy will have a critical impact on the efforts of the many agencies and organizations serving the blind and visually impaired.

INCOME SECURITY

COMMITTEES FOR SOCIAL SECURITY DISABILITY INCOME (SSDI) PROGRAM

Subcommittee on Social Security, House Committee on Ways and Means

Subcommittee on Social Security and Income Maintenance Programs, Senate Committee on Finance

COMMITTEES FOR SUPPLEMENTAL SECURITY INCOME (SSI) PROGRAM

Subcommittee on Public Assistance and Unemployment Compensation, House Committee on Ways and Means

Subcommittee on Social Security and Income Maintenance Programs, Senate Committee on Finance

There are two federal income maintenance programs under the Social Security Act which significantly affect many blind people in the United States: (A) Old Age, Survivors and Disability Insurance (Title II); and (B) Supplemental Security Income (Title XVI). According to recent estimates by the Social Security Administration (SSA), there are approximately 93,000 blind persons under age 65 who receive Social Security Disability Insurance (SSDI) benefits under Title II and approximately 80,000 blind persons, including approximately 23,000 over age 65, who receive Supplemental Security Income (SSI) benefits under Title XVI. SSA has further estimated that approximately 35 percent of the SSDI recipients also receive some SSI benefits for which they are eligible based on financial criteria.

A. SOCIAL SECURITY DISABILITY INSURANCE (SSDI) - TITLE II

Program

Social Security Disability Insurance benefits are designed to provide income to a worker who loses earning power because of a severe disability which makes it impossible for that person to engage in substantial gainful activity (SGA). To be eligible for these benefits, a worker must meet minimal status requirements of the law.

Blind recipients of Social Security Disability Insurance benefits in 1985 may earn up to \$610 a month (\$7320 per year) without loss of benefits and they are permitted to deduct work-related expenses from gross earnings. Earnings in any month which exceed the monthly maximum make the blind beneficiary under 55 years of age ineligible to receive any benefits; however, the beneficiary is given a "trial work period" before a decision is made on whether benefits should continue. Payments to blind beneficiaries over age 55 are suspended for any month in which there is actual performance of SGA (i.e., earnings over \$610 per month) but are resumed for months in which earnings do not exceed the maximum amount.

The average benefit in 1985 for all disabled workers is approximately \$473 per month for a principal beneficiary and \$893 for a disabled worker and family. Children of disabled workers and spouses who care for children of disabled workers may also be eligible for benefits. However, there is a ceiling on total family benefit which may be as low as the disabled worker's primary insurance amount (PIA) but cannot exceed 150 percent of the PIA.

Existing Services and Benefits to Blind and Visually Impaired People

The 1977 amendments to the Social Security Act established that evaluations of the ability of blind persons to perform substantial gainful activity are to be based on an examination of actual earnings rather than on the perceived ability to earn. Blind people who earn over the SGA amount--after a trial work period--have their benefits terminated. In many cases, the threat of loss of benefits provides a disincentive to return to work full time. We therefore recommend that earnings over the SGA amount for blind people be treated in the same manner as earnings for retired Social Security beneficiaries--i.e., for every two dollars in earnings over the allowable amount, benefits should be reduced by one dollar. We believe such an amendment to the law would provide a positive incentive for blind people to "work their way off the SSDI rolls."

Recent Changes and Their Impact

In 1981 the Social Security Administration began conducting continued eligibility reviews of disabled persons. These investigations created turmoil and widespread suffering for individuals and families. Beginning in March 1981, over 470,000 SSDI recipients received initial notices that their benefits would be terminated; of these, 190,000 were removed from the rolls; 160,000 had benefits restored on appeal; and 120,000 cases were pending hearing as of October 9, 1984, when the Social Security Disability Benefits Reform Act of 1984 (P.L. 98-460) became law. This new law was designed to protect persons with continuing disability from

being removed from SSDI roles. The law established standards for evaluating medical improvements which must be applied before disability benefits can be terminated, and it provides for continuation of benefits during appeal. P.L. 98-460 also requires the Secretary of Health and Human Services (HHS) to initiate demonstration projects to provide face-to-face interviews for pre-termination continuing disability cases and for all initial denial cases. The law also requires SSA to consider the effects of combined disabilities in making eligibility decisions.

B. SUPPLEMENTAL SECURITY INCOME (SSI) - TITLE XVI

Program

Title XVI--Supplemental Security Income (SSI)--was enacted in 1972 (effective January 1, 1974) to establish a national needs-based program of income security for low-income aged, blind, and disabled persons. The SSI program supplanted various federal-state public assistance programs.

Existing Services and Benefits to Blind and Visually Impaired Persons

To be eligible for SSI, the blind person must meet both the legal definition of blindness and the SSI criteria for income and resource limitations. In 1985 the SSI monthly benefit payment level is \$325 for an individual and \$488 for a couple. In some cases individuals and/or couples may have more if the additional income is "earned." The first \$65 a month of earned income is excluded but any excess above that amount reduces benefits 50¢ for each dollar earned.

The SSI assets test keeps many disabled and blind children from receiving SSI benefits because of the deeming of family assets only to the disabled children even if there are other children in the family. This inequity could be remedied by allocation of family assets to both disabled and non-disabled children when determining a child's SSI eligibility.

Recent Changes and Their Impact

Since its inception in 1973, the SSI program has been relatively static, although there have been cost-of-living adjustments annually. The resource limit was increased slightly in 1985, and modest annual increases are effective until 1989 under P.L. 98-369.

Under the program as currently constituted, the resource limitations are still very low and incentives for individuals to work and eventually reach a level at which they can exist without SSI benefits are not part of the program.

Other problems are apparent in the program. For example, U.S. citizens in Puerto Rico, Guam, and the Virgin Islands are not eligible for SSI. Also some gifts and charitable in-kind assistance are counted as income and reduce SSI benefits, thus chilling private-sector charitable donations.

Large numbers of aged, blind, and disabled people who could be eligible for SSI benefits are not enrolled in the program. It is estimated that over two million elderly people who would qualify do not participate. Even though the amendments to the Social Security Act in 1983 required SSA to notify all aged recipients of Social Security Retirement Benefits of their possible

eligibility for SSI, very few additional applications were made. It has not been determined why so many people with extremely low incomes fail to participate in the SSI program. The Supplemental Security Income program still does not provide the basic protection from poverty for low-income aged, blind, and disabled people that it was designed to offer.

NATIONAL EYE INSTITUTE

COMMITTEES

Senate Committee on Labor and Human Resources
Subcommittee on Health and the Environment, House
Committee on Energy and Commerce
Subcommittee on Labor, Health and Human Services, and
Education and Related Agencies, House Committee on Appropriations
Subcommittee on Labor, Health and Human Services, and
Education, Senate Committee on Appropriations

Program

The National Eye Institute (NEI), a research institute of the National Institutes of Health (NIH), funds research on prevention and treatment of eye diseases and disorders. Most of NEI's funding goes for grants to individual scientists at research centers throughout the United States. NEI also provides money for training additional eye research scientists and for clinical trials of new treatments for vision problems.

Existing Services and Benefits to Blind and Visually Impaired

People

Research supported by the National Eye Institute has brought about advances in the treatment of many serious eye diseases. For example, NEI pioneered the use of lasers to treat blindness as the result of diabetes, the major cause of blindness in working-age adults. The technique has cut the incidence of blindness from diabetic retinopathy by two-thirds.

Currently, maculopathy, the leading cause of blindness in people over age 65 is responsible for about 8,000 new cases of legal blindness annually. In 1982 NEI announced that it had proven

that severe vision loss can be prevented when laser treatments are applied within days or weeks of the onset of maculopathy.

Approximately 475,000 cataract extractions are performed annually in the United States, restoring useful vision to about 95 percent of those treated, at a cost of \$1.2 billion annually. The figure could be reduced by \$530 million per year if medication were developed to retard the growth of cataracts enough to delay the need for surgery by ten years. NEI is on the threshold of developing medication to accomplish this and to slow the loss of eyesight in three million people in the United States who currently have cataracts.

NEI research has already paid dividends to those severely impaired people whose vision loss has been slowed or stopped as a result of innovations in medical treatment. In addition NEI is sponsoring research into better techniques to help severely visually impaired people make better use of their remaining vision.

Recent Changes and Their Impact

The budget of the National Eye Institute has risen about ten percent per year since 1982. This increased funding has made it possible for NEI to keep up with inflation and to keep current projects moving forward.

Continued federal funding for NEI and the projects it supports is necessary and cost-effective in reducing the incidence of blindness and severe visual impairment, especially among the elderly.

COMMITTEES

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies, House Committee on Appropriations

Program

As we have noted in several other sections of this manual, blindness is a unique disability and blind people are best served by education and rehabilitation personnel who have received specialized training in areas such as orientation and mobility, braille, low vision devices, etc.

Because blindness is a low incidence disability, the number of professionals involved is relatively small. It is for this reason that colleges and universities are seldom willing or able to support programs to train teachers of the visually handicapped or orientation and mobility specialists. The federal government first recognized this problem in 1960 and what was then the Office of Vocational Rehabilitation within the Department of Health, Education and Welfare awarded a grant to Boston College to establish a university training program in orientation and mobility. In 1964 the first grants were awarded for programs to train teachers of the visually handicapped.

Existing Services and Benefits to Blind and Visually Impaired People

Federal money to support programs for training professionals to serve blind persons comes through two pieces of legislation:

(1) Under the Rehabilitation Act, the discretionary program for

rehabilitation training has included grants for programs in orientation and mobility as well as rehabilitation teaching. IN FY 1984, \$800,000 was awarded to a total of 13 university programs in orientation and mobility and rehabilitation teaching. (2) Under the Education of the Handicapped Act, the discretionary program on Personnel Preparation provided \$1,437,123 for 21 projects in FY 1984. Some of these projects to train teachers of the visually handicapped include dual certification as orientation and mobility specialists.

Recent Changes and Their Impact

The Reagan Administration has made several efforts to cut federal money for all rehabilitation training and teacher preparation programs. Congress has thus far refused such recommendations, recognizing that such "savings" would cost us dearly when we face severe shortages of qualified personnel in the future.

Even though federal funding has remained fairly stable in the field of services to blind and visually impaired children and adults, "the future is now" as far as shortages of qualified personnel are concerned. University programs report fewer applicants and schools and agencies around the country have greater difficulty finding qualified orientation and mobility specialists, vision teachers, rehabilitation teachers, et al. While federal money alone cannot solve this serious problem, it is absolutely essential that this source of support be continued. Existing programs are responsible for supplying the entire nation with qualified professional personnel and many of these programs are already struggling financially. For example, the teacher training

program at the University of Virginia was terminated by the state, in part due to the high cost and the uncertainty of continued federal funding.

One program now in jeopardy is that of the Florida State University (FSU). During a recent meeting with the Dean of FSU's School of Education, Florida leaders in the education of visually handicapped children learned that FSU's program for training teachers to work with visually impaired students will be eliminated over the next several years as tenured faculty begin leaving. This will occur unless necessary external funding can be assured. In 1985 Florida needed 20 additional teachers. However, relatively few certified people were available so several school districts employed non-trained personnel. Students needing special education help, such as braille instruction, are poorly served by untrained teachers.

This same story will be repeated around the country if federal support for personnel training programs is cut. The future of education and rehabilitation for our nation's blind citizens could be seriously jeopardized by the false economy of budget cuts in the crucial area of education and training.

RANDOLPH-SHEPPARD BLIND VENDING PROGRAM

COMMITTEES

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Subcommittee on Public Buildings and Grounds, House Committee on Public Works and Transportation

Senate Committee on Environment and Public Works

Program

The Randolph-Sheppard Act, first enacted in 1936, has provided employment opportunities for thousands of blind and visually impaired persons as operators of food service facilities located on federal property. The law grants to blind persons a priority in the operation of cafeterias, snack bars, and other vending facilities located on federal property, and further authorizes training, equipment purchase, and supervision of blind persons who operate such facilities.

Existing Services to Blind and Visually Impaired Persons

The Randolph-Sheppard Blind Vending Facilities Program is administered on the federal level by the Rehabilitation Services Administration (RSA) of the Department of Education through RSA's Division for the Blind and Visually Impaired. The program is administered on the state level by state licensing agencies, usually state rehabilitation agencies, which train and issue licenses to blind operators, fund equipment and start-up

costs, and otherwise provide ongoing local administration of the program.

Financing of the Randolph-Sheppard program is derived through state and federal vocational rehabilitation funds, a portion of the income of each vending facility operator, and revenue from vending machines located on federal property. For FY 1983 RSA reported that 3,677 blind persons were employed as operators of 3,261 facilities located on federal and other property. Gross revenue from sales in FY 1983 totaled \$279.6 million, net income was \$56.6 million, and the average annual income per blind operator was \$17,308.

Many states have enacted "little Randolph-Sheppard laws" which provide vending employment to blind persons in state and local government buildings as well as in the private sector. Earnings derived from federal and state programs enable blind persons to become skilled, independent, tax-paying citizens. A unique feature of the Randolph-Sheppard Act requires blind operators to support the program, in part, through the payment of a portion of their incomes to the state licensing agency.

Recent Changes and Their Impact

Although the Randolph-Sheppard program has been a success for almost 50 years, the program currently faces some challenges which can and should be addressed by the Congress. The 1974 amendments to the Randolph-Sheppard Act envisioned doubling the number of blind vending facilities in five years. This goal has not been achieved; in fact, the number of facilities has

remained virtually static. RSA reports that approximately 150 blind persons have been trained as vending facility operators but remain unemployed because of the lack of suitable locations. The slow growth of the program since 1974 is attributable to several factors including the high cost of rehabilitating severely disabled people, the limited number and/or distribution of vending facilities on federal property, reluctance on the part of some government property managing agencies to comply with the Act, and inadequate funding for renovating existing facilities or establishing new ones. The average cost of a new facility ranges from about \$19,000 for a so-called "dry stand," which sells pre-packaged candy, cigarettes, newspapers, and the like, to more than \$34,000 for a cafeteria. The 138 new facilities established in 1982 required a total expenditure of \$3.9 million. Many new vending facilities need to be established in order to realize Congress's promise to expand employment opportunities for blind persons, and some existing locations need to be upgraded to meet the ever-changing food service demands of the consumers.

Congress was asked in 1984 for an initial \$5 million appropriation to be used to establish new locations. Although Congress failed to appropriate the funds sought, the House Appropriations Committee included in its report a statement which recognized the need for funds to expand the program and requested further testimony during the FY 1986 budget and appropriations cycle. (See H.Rep. 98-511 at p. 116.)

A second challenge to the Randolph-Sheppard program involves compliance with the Act by federal property managing departments

and agencies. With respect to cafeteria operations, a federal property managing department or agency can comply with the Randolph-Sheppard Act and regulations by (1) contracting directly with the state licensing agency for cafeteria services or (2) by requiring the state licensing agency to bid in competition with other food service providers to determine whether a Randolph-Sheppard facility can provide high-quality food at reasonable cost. If the state licensing agency's bid is determined to be within a competitive range, the federal department or agency must award the contract to the state licensing agency.

Recently the Department of Defense circumvented the Act by contracting directly with fast food chains without first soliciting bids from the appropriate state licensing agencies as required by the Randolph-Sheppard Act and regulations. By report language accompanying the FY 1985 Defense Appropriations Bill, later incorporated by reference in the Report to the Continuing Resolution of 1985, the Congress requested the Department of Defense to report to it by March 1, 1985, concerning the department's food service procurement practices vis-a-vis compliance with the Randolph-Sheppard Act. (See H.Rep. 98-1086 at p. 24; Congressional Record, October 10, 1984, at p. H11940.)

In October 1984 eight plaintiffs, including the Act's author, the Honorable Jennings Randolph (D-W.Va.), sued the Department of Defense concerning violation of the Act. Although the District Court in a memorandum decision dated January 4, 1985, dismissed the plaintiffs' complaint and awarded judgment to the defendants, an appeal has been taken to the Court of Appeals of the District of Columbia Circuit.

With continued congressional support and oversight, the Randolph-Sheppard program can be invigorated and expanded as it begins its second half-century of providing livelihood to many blind and visually impaired Americans.

REHABILITATION

COMMITTEES

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies, House Committee on Appropriations

Program

Vocational rehabilitation services are designed to enable handicapped persons to engage in productive employment. The Rehabilitation Services Administration (RSA) in the Department of Education administers several rehabilitation programs for disabled people including those who are blind and visually impaired.

These programs include: (1) an 80/20 percent formula matching grant to states for basic vocational rehabilitation services, including counseling, evaluation, medical services, and training; (2) discretionary grants for independent living centers, special projects for the severely handicapped or underserved populations, projects with industry, personnel training, comprehensive rehabilitation centers, facilities improvement and technical assistance; and (3) a formula grant for client assistance programs. In 1983, 938,923 handicapped persons received rehabilitation services. Of these, 216,231 were rehabilitated. Of the number rehabilitated, 3.8 percent (or 8,300) were blind and 5.5 percent (or 12,000) were visually impaired, for a total of 20,300 blind and visually impaired persons.

Existing Services and Benefits to Blind and Visually Impaired People

The working-age population of disabled persons is the primary service target of the vocational rehabilitation program. The types of rehabilitation services provided to blind and visually impaired persons include training for employment and vital services such as orientation and mobility instruction. These services are provided to blind and visually impaired persons through one of three types of service delivery systems: (1) separate state agencies serving blind people (most frequently referred to as "commissions"); (2) programs which are part of the general state vocational rehabilitation agency; and (3) agencies which are part of another agency such as a department of education or welfare but which have a separate state plan and/or an identifiable, separate share of federal vocational rehabilitation money for services to blind persons.

A national study evaluating programs for blind and visually handicapped persons was published in December 1980. This study was commissioned by the Rehabilitation Services Administration (RSA) and cited in RSA's annual report for FY 1981. The study concluded that blind clients are better served in specialized caseloads. The corollary recommendation was that blind and visually handicapped vocational rehabilitation clients should be served in specialized caseloads of only blind and visually handicapped clients. Since much of the trend toward "umbrella" agencies has been premised on the claim that such consolidation saves money, another finding of the study is extremely important.

The study stated that "the assumption that combined agencies are more cost effective (than separate blind agencies) should be seriously questioned." These two findings, when considered together, provide a powerful rationale for separate agencies serving blind people; namely, the clients are better served in specialized caseloads and such structures are just as cost effective as (some would say even more than) "umbrella" agencies.

Since the late 1930s, a separate, identifiable operating unit within RSA has provided technical assistance and specialized expertise to the states relative to the unique rehabilitation needs of blind and visually impaired persons. Currently called the Division for the Blind and Visually Impaired, this unit is an important element in the delivery of vocational rehabilitation services to blind and visually impaired persons. The long-standing federal commitment to a specialized unit within RSA is an important recognition of the unique needs of blind persons and the need for a strong, identifiable Division for the Blind and Visually Impaired is as urgent today as it was in the 1930s.

Included in the discretionary grants programs under the Rehabilitation Act of 1973, as amended, is Title VII, Part C, which authorizes special independent living services for older blind people. (See the section of this manual on Services to Older Blind Persons for further details on Title VII, Part C.)

Other programs funded through discretionary grants which are of importance in serving blind persons include the Projects with Industry and the Rehabilitation Research and Training Centers which are funded through grants from the National Institute of Handicapped Research.

Client assistance programs (CAP) also benefit blind and visually impaired people by providing counseling and ombudsmen assistance in connection with an individual's rehabilitation program.

Recent Changes and Their Impact

The Rehabilitation Amendments of 1984, P.L. 98-221, reauthorized the basic state grants portion (Section 110) of the Act through FY 1986 with a provision that the authorization will automatically be extended for another year if Congress has not passed reauthorizing legislation by the end of FY 1986. All discretionary programs were also reauthorized through FY 1986.

SENSORY AND COMMUNICATION AIDS

COMMITTEES

Subcommittee on Health and the Environment, House Committee on Energy and Commerce

Subcommittee on Health, House Committee on Ways and Means

Subcommittee on Health, Senate Committee on Finance

Subcommittee on Select Revenue Measures, House Committee on Ways and Means

Subcommittee on Economic Growth, Employment and Revenue Sharing, Senate Committee on Finance

Program

The purpose of this section is to discuss methods of funding for aids and devices used by blind and other disabled people to ameliorate the effects of sensory and/or communications disorders. The discussion of this subject will focus first upon Medicare coverage for sensory and communications aids and will conclude with a brief note concerning other potential funding mechanisms.

Existing Services to Blind and Visually Impaired Persons

The federal Medicare program provides payment for devices such as wheelchairs and crutches which are needed to overcome the limitations of physical disability. However, the Medicare system does not provide specific coverage for aids and devices which assist blind and other disabled people having sensory or communications disorders.

Examples of sensory and communications aids include talking or braille output computer terminals, telecommunications devices

for deaf and deaf/blind persons, and closed-circuit television systems which magnify print size for the visually impaired.

Nothing in the current Medicare regulations prohibits the purchase of sensory and communications aids. However, a May 1982 study by the Office of Technology Assessment (OTA) found that requests for Medicare reimbursement for this type of equipment are often denied because technologies are not considered to be "medically necessary." Unfortunately, the primary focus of the Medicare program has been on acute medical problems, and little attention has been given to the amelioration of chronic disabilities. "A connection needs to be made in these programs between paying for technologies and the potential independence and productivity of disabled people." (Technology and the Handicapped," a report of the office of Technology Assessment, May 1982, pp. 177-178.)

Because a high percentage of disabled people have low incomes, few can afford to purchase needed technologies. In fact, the U.S. Census Bureau recently reported that 26 percent of disabled working-age adults have incomes below the poverty line and that this poverty rate is two and one-half times that for nondisabled working-age adults. (Labor Force Status and Other Characteristics of Persons with Work Disability, Series P-23127, U.S. Census Bureau, 1982; see also "Physical Disability and Public Policy," Scientific American, Vol. 248, No. 6, June 1983, p. 42.)

OTA also found that there are few available mechanisms for financing needed technologies and the methods which do exist are available only in certain parts of the country.

Many blind and visually impaired people have encountered difficulty in securing bank loans for the purchase of sensory and communications aids. Rehabilitation agencies which once were willing to underwrite the cost of such equipment find it increasingly difficult to do so as they face higher costs and greater demand for their services. Moreover, financial aid through charitable foundations and the like is limited and fails to meet the demand for such assistance.

Recent Changes and Their Impact

Legislation was introduced in the House by Representative George Brown (D-Ca.) and in the Senate by Senator Spark Matsunaga (D-Hi.) during the 98th Congress to provide Medicare coverage for education- and employment-related sensory and communications aids for disabled people who are eligible for Medicare benefits. A hearing was held by the Subcommittee on Health of the House Committee on Ways and Means on February 27, 1984. Under the proposed legislation, the Medicare deductible and the customary 20 percent co-payment would have applied. Coverage would also have been limited to \$5,000 per individual in any one calendar year with a maximum coverage of \$15,000 in any five consecutive years. In addition to these provisions, any newly introduced legislation should include coverage for the cost of not only the aid itself but also for training and servicing of the equipment--essential components to the successful utilization of these technologies.

The dollar limitation of coverage per individual and the co-payment requirement ensures that the cost to the Medicare

system for sensory and communications aids coverage would be minimal. OTA has found that a significant defect in the current Medicare system is the failure to recognize that funds may be saved in the short term through limited coverage but in the long term a greater expenditure will result through income maintenance payments, for example, or institutionalization of a person who could be productive with the use of a sensory or communications aid. ("Technology and the Handicapped," pp. 177-178.)

Finally, OTA recommended exploration of other funding mechanisms including tax incentives, low interest loans, and loan guarantees to aid blind and other disabled people in the acquisition of needed technology. Draft legislation has been developed which provides a limited 50 percent tax credit for the purchase of sensory and communications aids needed for employment.

Many blind and other disabled people have been employed or are able to be more productive through the use of sensory and communications aids. Financial barriers to the acquisition of sensory and communications aids must be eliminated so that more blind and disabled people can benefit from technology.

SERVICES FOR OLDER BLIND PERSONS

COMMITTEES FOR REHABILITATION ACT

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

COMMITTEES FOR OLDER AMERICANS ACT

Subcommittee on Human Resources, House Committee on Education and Labor

Subcommittee on Aging, Senate Committee on Labor and Human Resources

Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies, House Committee on Appropriations

Subcommittee on Labor, Health and Human Services, and Education, Senate Committee on Appropriations

Program

The Older Americans Act and the Rehabilitation Act have provided a limited basis for services to older blind and visually impaired persons. Typically, services have included training in independent living, transportation services to rehabilitation programs, and interagency planning assistance. It is important that the range of services to older persons be expanded because severe vision loss, including blindness, now affects more persons over 65 than all other age groups combined. Estimates based on data compiled by the National Society for the Prevention of Blindness and the National Center for Health Statistics show that more than 1.7 million people suffer from severe vision loss and more than one million of these are 65 and older. The sharpest

increase in these numbers will come from the 75 and older age group. Many of these people will also suffer from other disabilities such as hearing loss and mobility impairment.

Existing Services and Benefits to Older Blind and Visually Impaired People

The Rehabilitation Act's basic state grant authority has been used by state agencies to provide some independent living training for older blind and visually impaired persons when such training can be justified as a means of assisting them to maintain their homes. These so-called "homemaker closures" have been the single greatest source of assistance outside of the individual efforts of private agencies and some combined services financed through Title XX of the Social Security Act (the Social Services Block Grant) and Title VII, Part B of the Rehabilitation Act (Centers for Independent Living).

The Older Americans Act does not contain direct authority for service provision to older blind and visually impaired persons. However, its broad authority under Title III (Grants for State and Community Programs on Aging) has been tapped by the aging network, and area agencies in particular, to provide assistance in vision screening, planning for service delivery to older persons whose impairments include severe vision loss, and direct service such as transportation. In addition, Section 422(b) of the Older Americans Act does give the Commission on Aging the discretion to fund the development of procedures to identify and coordinate supportive services for the elderly blind and disabled.

Recent Changes and Their Impact

Administration on Aging programs have survived attempts at consolidation and block granting. However, appropriations have not increased significantly while program requirements have increased with the growth of the elderly population.

The homemaker closures under the Rehabilitation Act will continue to be an important category of services. However, both state budgetary constraints and limited increases in appropriations for the basic state grants mean that this category of service will not keep pace with the rapid increase in the elderly blind and severely vision impaired population.

The 1984 amendments to the Rehabilitation Act have provided Congress with a first-time authority to fund independent living services for older blind persons, separate from the overall independent living authority. An appropriation for this section-- Title VII, Part C--would provide an important new element for the package of services needed for this population. Under the above authority, state agencies could provide orientation and mobility training, low vision examination, low vision aids, training in the use of aids, and rehabilitation teaching.

SPECIAL EDUCATION

COMMITTEES

Subcommittee on Select Education, House Committee on Education and Labor

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies, House Committee on Appropriations

Subcommittee on Labor, Health and Human Services, and Education, Senate Committee on Appropriations

Program

Special education services are those which assist disabled children to overcome their educational handicaps. The Office of Special Education of the Department of Education is responsible for federal administration of a variety of programs to aid disabled children. These include formula grants for state-operated schools for the handicapped under Chapter I of the Education Consolidation and Improvement Act, formula grants to the states under the Education of the Handicapped Act, and the following discretionary grant programs under the latter Act: preschool incentive grants, deaf-blind centers and services, early childhood education grants, personnel development grants, media services and captioned films, severely handicapped projects, innovation and development, and regional resource centers, among others.

Existing Services and Benefits to Blind and Visually Impaired

People

One special-purpose discretionary grant program provides funding for deaf-blind regional centers. The rubella epidemic

of the 1960s resulted in the deaf-blindness of at least 6,000 babies, many of whom, along with children deaf-blind from other causes, have received educational services through these centers.

Blind and visually impaired children benefit greatly when they have access to teachers who are professionally trained (preferably at the masters degree level) and certified in education of the visually handicapped. Unfortunately, in many smaller school districts, blind and visually impaired children are taught by teachers who are neither professionally trained nor certified in the specialty of visually handicapped. Although these teachers may be well-intentioned people who may possess professional training and credentials with respect to other disabilities, the teaching and learning process for blind and visually impaired students requires a tremendous amount of specialized knowledge if the child is to get the most benefit from education. (See the section in this manual on Personnel Preparation for more detailed information.)

Recent Changes and Their Impact

The discretionary programs under the Education of the Handicapped Act were reauthorized in the First Session of the 98th Congress. Major provisions of the legislation include:

(1) Restoration of the National Advisory Committee on the Education of Handicapped Children and Youth.

(2) Provision for improved federal data on ages of children served, participation in vocational education, youth graduating from special education, and the need for improved services.

(3) Allowance for federal funds under the preschool incentive grant program to be used to serve handicapped children below age three.

(4) Establishment of grants to states to develop and implement comprehensive plans to provide early childhood education to all handicapped children from birth.

(5) Expansion of the program to provide for model demonstration postsecondary education programs, including vocational, technical, and continuing and adult education.

(6) Establishment of new programs to stimulate and improve secondary special education and the transition to postsecondary special education, vocational rehabilitation, continuing education, employment, independent living, and other adult services.

(7) Refocusing of personnel preparation resources on the preparation of special education personnel, and requiring colleges and universities receiving grants to meet state and professionally recognized standards.

(8) Establishment of a new clearinghouse for dissemination of information on federal laws, career and job opportunities in special education and available services and programs in postsecondary education for the handicapped.

(9) Placing of federal research emphasis on the improvement of teaching methodology and curriculum, and the application of new technologies toward improved instruction.

In light of the projected increase in the number of blind and visually handicapped persons in the school-aged population

and the shrinking buying power of the dollar, an increasing level of federal financial support is necessary to assure that blind and visually impaired children have maximum opportunities to lead meaningful and productive lives.

WORKSHOPS

COMMITTEES

Subcommittee on Employment and Housing, House Committee on Government Operations

Subcommittee on the Handicapped, Senate Committee on Labor and Human Resources

Subcommittee on Labor Standards, House Committee on Education and Labor

Subcommittee on Labor, Senate Committee on Labor and Human Resources

Program

The Wagner-O'Day Act established a priority for purchase by the federal government of selected commodities manufactured by nonprofit workshops serving blind persons. The legislation was instrumental in broadening the market for blind made products, thereby significantly increasing employment opportunities for blind people.

The Wagner-O'Day Act, now known as the Javits-Wagner-O'Day Act, has proven to be one of the most successful federal-private partnerships established by law. Its goal--to provide avenues of employment and self-sufficiency for blind, multihandicapped blind, and other handicapped citizens--has been realized and continues to be achieved.

Legislative Background

The Congress enacted the Wagner-O'Day Act in 1938 as a vehicle to provide steady, remunerative employment through a preference for workshops for the blind as a source for the purchase

of goods by the federal government. The Act created a "Committee on Purchases of Blind-Made Products" (the Committee) which would have the responsibility for developing program guidelines. The Act further called for the designation of a "central nonprofit agency" to administer the program. Prominent blind persons and workshops serving the blind created National Industries for the Blind to provide services to increase employment opportunities for blind persons and also fulfill the role of the "central nonprofit agency."

In 1971, amendments to the Act expanded employment opportunities for the blind through the inclusion of "services" for the government and expansion of the types of commodities purchased by the federal government. The Act was broadened to include workshops serving other handicapped persons and the Committee was renamed the "Committee for Purchase from the Blind and Other Severely Handicapped."

While workshops for the blind are afforded a priority over workshops for the other severely handicapped in manufacturing selected goods for federal government purchase, Federal Prison Industries has first priority over both types of workshops.

Existing Services and Benefits to Blind and Visually Impaired Persons

Workshops offer blind and multihandicapped blind persons opportunities for productive and remunerative work, coupled with some degree of self-support. Employment services are available for persons who are not capable of working in the competitive section, who cannot locate competitive employment, or who choose

not to seek such employment. Workshop services generally are offered to blind persons regardless of degree or severity of disability. Each workshop is required to maintain liaison with appropriate community placement agencies and to refer to these resources those blind persons who are capable to competitive employment.

Employment services are geared to the individual needs of the blind or multihandicapped blind person. Three levels of employment can be found within workshops which participate in the Javits-Wagner-O'Day program.

The first level is the "work activities center" which provides a range of therapeutic activities for the most severely disabled blind persons whose productive capacity is inconsequential. Productive employment in work activities centers is one of many therapeutic tools used to increase the functional level of workers.

The next level of employment is the special workshop which is responsive to those blind and multihandicapped blind persons who function at a higher level but still need a variety of supportive services.

The third level is the industrial workshop which provides employment for blind or multihandicapped blind persons who, compared with persons in the first two levels, are more productive but are nonetheless not yet capable of, choose not to seek, or for other reasons are precluded from competitive employment.

Other Related Legislation

The Rehabilitation Act of 1973, as amended, and its implementing regulations require each state to submit a "state plan" in which assurances are made for the periodic review and reevaluation of the status of handicapped people who have been placed in extended employment in workshops. This review is designed to determine the feasibility of the worker's employment or training in the competitive labor market. Further, workshops must comply with the provisions of Sections 503 and 504 of the Act regarding affirmative action and equal opportunity.

The authority for regulating the pay of blind and other handicapped workers in sheltered workshops is contained in the Fair Labor Standards Act, the Service Contract Act, and the Walsh-Healy Public Contracts Act. The Secretary of Labor is responsible for administering these Acts. Additionally, the Secretary of Labor administers the Occupational Health and Safety Act. The workshops must be in compliance with the provisions of this Act in order to ensure a safe working environment.

Section 14(c) of the Fair Labor Standards Act provides for partial exemption from the minimum wage to ensure the continuance of employment opportunities to persons whose productive capacity is impaired by physical or mental deficiency or injury. Section 14(c) also requires that the wages paid handicapped workers be commensurate with wages paid nonhandicapped workers performing comparable work. However, wages may not be less than 50 percent

of the federal minimum wage unless an exception applies in the instance of persons who are undergoing evaluation or training, who are multihandicapped with impaired productive capacity, or who require the therapeutic services of a work activities center.

Recent Changes and Their Impact

A significant recent change in the program has resulted in an increasing number of multihandicapped blind persons being referred to workshops. In addition, the workshops must be increasingly more selective in the type and complexity of work they undertake, due to the limited capabilities of their employees. National Industries for the Blind and the workshops are making an intensive effort to redesign evaluation and training services and work stations in order to accommodate more severely disabled blind workers.

